August, 1994

(MB)

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA	\					
Citation	SECTION 3 -	SERVI	CES: C	GENERA	L PRO	VISIONS
42 CFR Part 440, Subpart B	3.1	Amo	unt, Dura	ation, an	d Scope	of Services
1902(a), 1902(e), 1905(a), 1905(p), 1915, 1920, and 1925 of the Act		(a)	42 CI	in accordance with the requirements of bpart B and §1902(a), 1902(e), 1905(a), and 1925 of the Act.		
1923 of the rec			(1)	Categ	orically	Needy
					and in	the categorically needy are described <u>ATTACHMENT 3.1-A</u> . These services
1902(a)(10)(A) and 1905(a) of the Act.				(i)	throug define EPSD	item or service listed in §1905(a)(1) (h (5) and (21) of the Act, is provided as d in 42 CFR Part 440, Subpart A, or, for T services, §1905(r) and 42 CFR Part tubpart B.
				(ii)	of the nurse-under regard the are and b Nurse independent the nurse or assistance of the nurse or assistance of the nurse or assistance of the nurse	e-midwife services listed in §1905(a)(17) e. Act, are provided to the extent that midwives are authorized to practice. State law or regulation and without to whether the services are furnished in ea of management of the care of mothers that the abies throughout the maternity cycle. Individual end agreements with the aid agency without regard to whether rese-midwife is under the supervision of, ociated with, a physician or other health rovider.
						Not applicable. Nurse-midwives are not authorized to practice in this State.

TN No. 95-15	Approval Date //27/2	Effective Date 11-16-95
Supersedes		
TN No. 93-04		HCFA ID: 7982E

(BPD)

OMB No.: 0938-

August, 1991

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA					
Citation					
1902(e)(5) of the Act	3.1	(a)	(1)	•	uration and Scope of Services: Needy (Continued)
				service period and an the 60 while and re	ancy-related, including family planning e, and postpartum services for a 60 day (beginning on the day pregnancy ends) by remaining days in the month in which th day falls are provided to women who, pregnant, were eligible for, applied for, ceived medical assistance on the day the ancy ends.
			X	compl pregna	es for medical conditions that may icate the pregnancy (other than incy-related or postpartum services) are ed to pregnant women
1902(a)(10), clause (VII) in the matter following (F) of the Act				prenati planni may service women §1902	es related to pregnancy (including al, delivery, postpartum, and family ng services) and to other conditions that complicate pregnancy are the same es provided to poverty level pregnant n eligible under the provision of (a)(10)(A)(i)(IV) and (a)(10)(A)(ii)(IX) of the Act.

TN No. 93-04 Approval Date 01/03/94 Effective Date 06/16/93 Supersedes TN No. 90-21 HCFA ID: 7982E

Revision: HCFA-PM-92-7 (MB) Page 19b

OMB No.: 0938-

October, 1992

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA					
Citation					
	3.1	(a)	(1)	Amour (Contin	nt, Duration and Scope of Services: Categorically Needy nued)
				(vi)	Home health services are provided to individuals entitled to nursing facility services as indicated in item 3.1(b) of this plan.
1902(e)(7) of the Act				(vii)	Inpatient services that are being furnished to infants and children described in §1902(I)(1)(B) through (D), or §1905(n)(2) of the Act, on the date the infant or child attains the maximum age for coverage under the approved State plan will continue until the end of the stay for which the inpatient services are furnished.
1902(e)(9) of the Act				(viii)	Respiratory care services are provided to ventilator dependent individuals as indicated in item 3.1(h) of this plan.
1902(a)(52)(D) and 1925 of the Act				(ix)	Services are provided to families eligible under §1925 of the Act as indicated in item 3.5 of this plan.
1905(a)(23) and 1929				(x)	Home and Community Care for Functionally Disabled Elderly Individuals, as defined, described and limited in Supplement 2 to Attachment 3.1-A and Appendices A-G to Supplement 2 to Attachment 3.1-A.
		catego those s limits)	orically ne service, a	edy, spec nd lists th	dentifies the medical and remedial services provided to the rifies all limitations on the amount, duration, and scope of e additional coverage (that is in excess of established service ated services and services for conditions that may complicate

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DATE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

Citation §3.1(a)(1) Amount, Duration, and Scope of Services: Categorically

Needy (Continued)

§1905(a)(26) and §1934

☐ Program of All-Inclusive Care for the Elderly (PACE) services, as described and limited in Supplement 6 to Attachment 3.1-A.

Attachment 3.1-A identifies the medical and remedial services provided to the categorically needy, specifies all limitations on the amount, duration, and scope of those services, and lists the additional coverage (that is in excess of established service limits) for pregnancy-related services for conditions that

may complicate the pregnancy.

TN No. 99-01 Supersedes

TN No. N/A

Approval Date UN 3 1999

Effective Date 0

07/1/99

(BPD)

OMB No.: 0938-

August, 1991

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA								
Citation								
42 CFR Part 440,	3.1	Amo	Amount, Duration, and Scope of Services (Continued)					
Subpart B		(a)	(2)	Medically Needy				
				X	This State plan covers the medically needy. The services described below and in ATTACHMENT 3.1-B are provided.			
				Servic	es for medically needy include:			
42 CFR 440.220 1902(a)(10)(C)(iv) of the Act				(i)	If services in an institution for mental diseases (42 CFR 440.140 and 440.160) or an intermediate care facility for the mentally retarded (or both) are provided to any medically needy group, then each medically needy group is provided either the services listed in §1905(a)(1) through (5) and (17) of the Act, or seven of the services listed in §1902(a)(1) through (20). The services are provided as defined in 42 CFR Part 440, Subpart A and in §1902, 1905, and 1915 of the Act.			
					Not applicable with respect to nurse-midwife services under §1902(a)(17). Nurse-midwives are not authorized to practice in this State.			
1902(e)(5) of the Act				(ii)	Prenatal care and delivery services for pregnant women.			

TN No. 93-04	Approval Date 01/03/94	Effective Date 06/16/93
Supersedes		
TN No. 87-11		HCFA ID: 7982E

Revision: HCFA-PM-93-5 (MB) Page 20b

OMB No: 0938-

May, 1993

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

	SIA	LLLDAI	TOMBE	K IIIEE	MA OF THE SOCIAL SECONT FACT
State of VIRGINIA					
Citation					
	3.1	(a)	(2)	<u>Amou</u> (Conti	nt, Duration, and Scope of Services: Medically Needy nued)
1902(e)(9) of the Act				(xi)	Respiratory care services are provided to ventilator dependent individuals as indicated in item 3.1(h) of this plan.
1905(a)(23) and 1929 of the Act				(xii)	Home and Community Care for Functionally Disabled Elderly Individuals, as defined, described and limited in Supplement 2 to Attachment 3.1-A and Appendices A-G to Supplement 2 to Attachment 3.1-A.
				covere amoun ambula them. establi	CHMENT 3.1-B identifies the services provided to each ad group of the medically needy; specifies all limitations on the at, duration, and scope of those items; and specifies the atory services provided under this plan and any limitations on It also lists the additional coverage (that is in excess of shed service limits) for pregnancy-related services and services additions that may complicate the pregnancy.
TN No. 95-16			LAN	3 1 190	Fffective Date 11.01.05

Supersedes
TN No. 93-06

Approval Date 1 1990 Effective Date 11-01-95

(BPD)

OMB No.: 0938-

August, 1991 STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA					
Citation	3.1	(a)	(2)		nt, Duration, and Scope of Service: ally Needy (Continued)
				(iii)	Pregnancy-related, including family planning services, and postpartum services for a 60-day period (beginning on the day the pregnancy ends) and any remaining days in the month in which the 60th day falls are provided to women who, while pregnant, were eligible for, applied for, and received medical assistance on the day the pregnancy ends.
			X	(iv)	Services for any other medical condition that may complicate the pregnancy (other than pregnancy-related and postpartum services) are provided to pregnant women.
				(v)	Ambulatory services, as defined in <u>ATTACHMENT 3.1-B</u> for recipients under age 18 and recipients entitled to institutional services.
					Not applicable with respect to recipients entitled to institutional services: the plan does not cover those services for the medically needy.
				(vi)	Home health services to recipients entitled to nursing facility services as indicated in item 3.1(b) of this plan.
				(vii)	Services in an institution for mental diseases for individuals over age 65.
42 CFR 440.140, 440.150, 440.160 Subpart B, 442.441, Subpart C 1902(a)(10)(C) of the Act				(viii)	Services in an intermediate care facility for the mentally retarded.
				(ix)	Inpatient psychiatric services for individuals under age 21
TN No. 93-04		Approv	al Date	01/03/	94 Effective Date 06/16/93
Supersedes TN No. 87-11					HCFA ID: 7982E

(BPD)

OMB No.: 0938-

August, 1991

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA				
Citation				
	3.1	(a)	(2)	Amount, Duration, and Scope of Services: Medically Needy (Continued)
1902(e)(9) of the Act				(ix) Respiratory care services are provided to ventilator dependent individuals as indicated in item 3.1(h) of this plan.
				ATTACHMENT 3.1-B identifies the services provided to each covered group of the medically needy; specifies all limitations on the amount, duration, and scope of those items; and specifies the ambulatory services provided under this plan and any limitations on them. It also lists the additional coverage (that is in excess of established service limits) for pregnancy-related services and services for conditions that may complicate the pregnancy.

TN No. 93-04 Approval Date 01/03/94 Effective Date 06/16/93 Supersedes

TN No. 87-18 HCFA ID: 7982E Page 20c

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(BERC)

OMB No.

DATE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA

Citation

 $\S 3.1(a)(2)$

Amount, Duration, and Scope of Services: Medically

Needy (Continued)

§1905(a)(26) and §1934

☐ Program of All-Inclusive Care for the Elderly (PACE) services, as described and limited in Supplement 6 to Attachment 3.1-A.

Attachment 3.1-B identifies the medical and remedial services provided to the medically needy, specifies all limitations on the amount, duration, and scope of those services, and lists the additional coverage (that is in excess of established service limits) for pregnancy-related services for conditions that may complicate the pregnancy.

99-01 Approval Date

Effective Date

Supersedes

TN No.

TN No. N/A **HCFA**

(BPD)

March, 1993

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State of VIRGINIA						
	 	 	 		 	-

Citation

Amount, Duration, and Scope of Services (Continued) 3.1

Other Required Special Groups: Oualified Medicare (3) (a) Beneficiaries

1902(a)(10)(E)(i)and clause (VIII) of the matter following (F), and 1905(p)(3) of the Act

Medicare cost sharing for qualified Medicare beneficiaries described in §1905(p) of the Act is provided only as indicated in item 3.2 of this plan.

1902(a)(10)(E)(ii)and 1905(s) of the Act

Other Required Special Groups: Qualified (a) (4) (i) Disabled and Working Individuals

> Medicare Part A premiums for qualified disabled and working individuals described in §1902(a)(10)(E)(ii) of the Act are provided as indicated in item 3.2 of this plan.

1902(a)(10)(E)(iii) and 1905(p)(3)(A)(ii)of the Act

Other Required Special Groups: Specified (ii) Low-Income Medicare Beneficiaries

> Medicare Part B premiums for specified lowincome Medicare beneficiaries described in §1902(a)(10)(E)(iii) of the Act are provided as indicated in item 3.2 of this plan.

Other Required Special Groups: Families Receiving (a) (5) **Extended Medicaid Benefits**

1925 of the Act

Extended Medicaid benefits for families described in §1925 of the Act are provided as indicated in item 3.5 of this plan.

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Supersedes		
TN No. 87-18		HCFA ID: 7982E